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RECEIPT  
FILE COPY

File No.: 6727/0H610

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Simona COHEN et al.

Serial No.: 09/651,800

Examiner: Unassigned

Filed: August 30, 2000

Group Art Unit: 2176

For: **INTEGRATING DIVERSE DATA SOURCES USING A  
MARK-UP LANGUAGE**

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FEB 22 2001  
Technology Center 2100

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**REQUEST FOR CORRECTED FILING RECEIPT**

Hon. Commissioner of Patents  
and Trademarks  
Washington, D.C. 20231

Attn.: Application Processing Division  
Customer Correction Branch

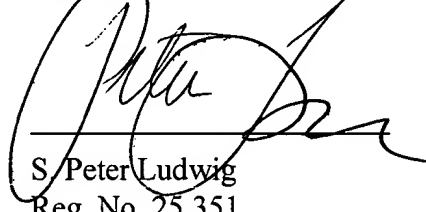
Sir:

A Filing Receipt (copy attached) for the above captioned application has been received by Applicant's attorney. Upon review of this document it was noticed that an error occurred in it. The Patent Office is respectfully requested to make the correction indicated below and to issue a new and correct Filing Receipt.

In the Applicant(s) section, please change the fourth inventor's name to read as follows: -- Ilan Paleiov --.

Dated: November 28, 2000

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'S. Peter Ludwig', is written over a horizontal line.

S. Peter Ludwig  
Reg. No. 25,351  
Attorney for Applicant(s)

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## UNITED STATES PATENT AND TRADEMARK OFFICE

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/651,800	08/30/2000	2176	1002	6727/OH610	4	29	3

Darby & Darby P C  
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## FILING RECEIPT



\*OC00000005540200\*

Date Mailed: 11/08/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

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## Continuing Data as Claimed by Applicant

## Foreign Applications

If Required, Foreign Filing License Granted 10/19/2000

## Title

Integrating diverse data sources using a mark-up language

## Preliminary Class

707

Data entry by : DIXON, DOROTHY

Team : OIPE

Date: 11/08/2000





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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/651,800	<b>FILING DATE</b> 08/30/2000 <b>RULE</b> -	<b>CLASS</b> 707	<b>GROUP ART UNIT</b> 2176	<b>ATTORNEY DOCKET NO.</b> 6727/0H610
<b>APPLICANTS</b> Simona Cohen, Haifa, ISRAEL; Tirts Hochberg, Haifa, ISRAEL; Haim Nelken, Haifa, ISRAEL; Ilan Paleiov, Kfar Vradim, ISRAEL; Pnina Vortman, Haifa, ISRAEL;				
<b>** CONTINUING DATA *****</b> J.A.				
<b>** FOREIGN APPLICATIONS *****</b> J.A.				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 10/19/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY ISRAEL	SHEETS DRAWING 4	TOTAL CLAIMS 29
Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>		INDEPENDENT CLAIMS 3		
<b>ADDRESS</b> Darby & Darby P C 805 Third Avenue New York, NY 10022				
<b>TITLE</b> Integrating diverse data sources using a mark-up language				
<b>FILING FEE RECEIVED</b> 1002	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	